



APPLICATION

for
Online Courses in Speech-Language Pathology
offered by
Tennessee State University, Nashville, Tennessee
Spring Semester ~~~~~ 2004

- *SPTH 310: Introduction to Human Communications Disorders and*
- *SPTH 350: Language and Speech Development of Children*

Eligibility Criteria

Individuals interested in enrollment in the speech-language courses listed above must satisfy the following requirements:

1. Obtain written recommendation from the Special Education Director. (See item K, page 3 of this document.)
2. Complete and submit the attached form - including ALL supporting documents - by November 01, 2003. (Type or print in ink.)
3. Present documentation of having been issued a waiver or permit (enabling applicant to serve as a speech-language pathologist outside his or her area of endorsement during the 2003-04 school year.) (See item F, page 3 of this document.)
4. Satisfy all Tennessee State University and Departmental requirements for admission:
 - a. Complete an application for admission to TSU Graduate School, initially enrolling as a "non-degree seeking student." (Include the application with other required documentation. It will be delivered to the TSU Graduate School on applicant's behalf by the TSU Speech Language Department.) The TSU Graduate application may be downloaded at the following site: www.tnstate.edu/grad/app.doc.
 - b. Possess a minimum grade point average of 3.0 in a Bachelor's program
 - c. Possess a minimum GRE score of 800 or MAT score of 30. (If the applicant has not taken the GRE or MAT, arrangements must be made immediately to take one of these tests during the fall semester of 2003 to help ensure TSU Graduate School admission by spring 2004.)
 - d. Submit a letter of intent that (1) indicates why you (the applicant) want to participate in this distance education Master's degree program in Speech Language; (2) describes the need in the system where you are employed; (3) indicates your intent to **complete** a Master's degree program; and (4) indicates your intent to serve in the TN Public Schools following the completion of the program
 - e. Submit three letters of recommendation (Include with application)
5. Sign a payback contract agreeing to serve two years as a speech language pathologist in the Tennessee public schools for every academic year (fall, spring, and summer semesters) of financial support (i.e., tuition, books, and fees) received through grant funds. (Contract form will be provided after applicants are selected.)

6. Have a computer with access to (a) Internet Explorer (or comparable) browser, and (b) PowerPoint.
7. Submit the following items with application:
 - (a) Application to TSU Graduate School (For a copy of the application, see the following site: www.tnstate.edu/grad/app.doc)
 - (b) Copy of Tennessee teaching license
 - (c) Two official copies of all undergraduate transcripts of college credits (If official copy is unavailable, submit student copy with application and forward official copy to Dr. Tina Smith [see address below] by November 07, 2003.)
 - (d) Copy of GRE or MAT score report
 - (e) Three letters of recommendation
 - (f) Letter of intent (by applicant)
 - (g) Twenty-five dollar (\$25.00) money order or cashier's check made payable to TSU Graduate School

Application Deadline

The completed application and the supporting documents MUST be received by 12:30 p.m. November 01, 2003. Send the items to: Dr. Tina Smith; Tennessee State University; 330 10th Avenue North, Box 131; Nashville, TN 37203-3401.

Other Information

- √ Applicants will be notified of selection status by December 05, 2003.
- √ Individuals selected to participate in this distance education program will receive additional information concerning matriculation at TN State University (from TSU).
- √ A one-day orientation will be offered on the TSU campus (date to be determined) to provide other information concerning this distance education program, student expectations, reporting, etc.

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A. Applicant's Name: \_\_\_\_\_ SS#: \_\_\_\_\_

B. Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Tel: \_\_\_\_\_ FAX: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Highest Degree Earned: \_\_\_\_\_

C. School System or Agency \_\_\_\_\_ County: \_\_\_\_\_  
Where Employed: \_\_\_\_\_

D. School Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Tel: \_\_\_\_\_ FAX: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

E. Current Endorsements: \_\_\_\_\_

F. Has your School System been issued a waiver or permit on your behalf? Yes ☐ No ☐  
If "yes," indicate in which area(s): \_\_\_\_\_

G. Summarize your present teaching (speech-language) assignment. (Include also the number of (a) students in general education and (b) students with disabilities served.)

H. Will you receive any other financial support that entails a teaching commitment or other service obligation after you earn the Master's degree in this distance education Speech Language Program?

Yes ☐ No ☐ If "yes," provide an explanation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I. Does your application submittal contain this 3-page document AND the supporting documents delineated / requested in item (7) on the preceeding page?

Yes ☐ No ☐

**PLEASE NOTE: Incomplete applications will NOT be considered.**

J. **Certification by Applicant:** *I understand that this application must be completed by me and received by TSU by Novmeber 01, 2003 to be considered. The application must be mailed to Dr. Tina Smith; TN State University; 330 10<sup>th</sup> Avenue North, Box 131; Nashville, TN 37203-3401. I realize that it MUST be supported by the documents listed in item (7) above. I also understand that incomplete applications will not be evaluated for acceptance in this distance education program. I certify that I have read this application, and that it is accurate to the best of my knowledge. I agree to provide, if requested, other documentation to verify such information. I agree to notify TSU of any change in my status, including but not limited to my name, address, and school system where employed. I understand to remain eligible for this program, I must maintain a minimum of a 3.0 GPA. I also affirm my intent to serve as a speech language therapist in the Tennessee public schools two years for each academic year (fall, spring and summer semesters) of financial support received through grant funds that support this program.*

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Date)

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K. **Recommendation/Assurance by the Special Education Director or Director of Schools:**
I recommend this applicant, _____, for full participation in the TSU Distance Education Master's Degree Program in Speech Language Pathology. I also give assurance that (a) the _____ School System has been issued a waiver or permit on this applicant's behalf; (b) that the applicant's present assignment includes speech language; and (c) that this System intends to continue employing this person to serve students with speech-language needs.

(Signature)

(Title)

(Date)

**TENNESSEE STATE UNIVERSITY
DEPARTMENT OF SPEECH LANGUAGE PATHOLOGY AND AUDIOLOGY
DISTANCE EDUCATION COURSE SCHEDULE
PREREQUISTE COURSES
(STUDENTS WITHOUT A BACKGROUND
IN SPEECH LANGUAGE)**

REQUIRED COURSES

CREDIT HOURS DELIVERY

SPRING 2004

SPTH 310: Introduction to Human Communication Disorders	3	Distance
SPTH 350: Language and Speech Development in Children	3	Distance

SUMMER 2004

SPTH 260: Phonetics	3	Distance
SPTH 250: Speech & Hearing Science	3	Distance
SPTH 372: Identification and Appraisal of Speech and Language Disorders	3	On Campus

FALL 2004

SPTH 330: Clinical Methods in Articulation Disorders	3	Distance
SPTH 374: Introduction to Audiology	3	Distance